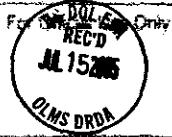


FORM LM-30
**LABOR ORGANIZATION OFFICER AND
EMPLOYEE REPORT**

This report is mandatory under P.L. 96-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 436 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number <u>U-3100</u>	2. Fiscal Year Covered From <u>01/01/2004</u> Through <u>12/31/2004</u>
3. Name and address of person filing. Name <u>ROGER G. BUYER</u> P.O. Box, Bldg., Room No., if any <u>P.O. Box 685</u> Street <u>21297 FOSTORIA RD.</u> City <u>PEMBERVILLE</u> State <u>OHIO</u> ZIP Code + 4 <u>43950-0685</u>	4. Name, file number, and address of labor organization. Name <u>IAMAW LOCAL LODGE 1210</u> Labor Organization File Number <u>002 873</u> P.O. Box, Building and Room Number, if any <u>P.O. Box 685</u> Street <u>21297 FOSTORIA Rd.</u> City <u>PEMBERVILLE</u> State <u>OHIO</u> ZIP Code + 4 <u>43950 0685</u>
5. Position in labor organization. <u>SECRETARY TREASURER</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the questions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employee your organization represents or is actively seeking to represent.	C. Nature of Interest, Transaction, or Income. <u>No Income other than Regular Employment</u>
B. Name and address of Employer (including trade name, if any)	D. Nature of Interest, Transaction, or Income.
Name Trade Name, if any P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	E. Nature of Interest, Transaction, or Income.

Signature

15. Signature and verification. The undersigned declares, under penalty of perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed Roger G. Buyer

On 09-08-05 419 849 2263

Date

Telephone Number

Name of Person Filing

ROGER G BUYER

Fax Number 41-3100

B. Hold an interest in or derived income or economic benefit and monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from, or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

C. Name and address of Business (including trade name, if any)

Street

Trade Name, if any

P.O. Box, Room No., if any

Street

City

State

ZIP Code + 4

D. If B-1 or B-2 is checked give trust or employee's name

Name

Trade Name, if any

P.O. Box, Room No., if any

Street

City

State

ZIP Code + 4

E. Business deals with:

a. Labor Organization

b. Trust

c. Employee

F. Is a trustee of such dealing

G. Approximate value of such dealing

H. Approximate amount paid or expected received

I. Is it a trust

J. Name and address of Employer or labor organization
including trade name, if any

Name

Trade Name, if any

P.O. Box, Room No., if any

Street

City

State

ZIP Code + 4

K. Is the Business an Employer

L. Company

M. Amount of payment